

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003903

Entity Name: BEACH HIDEAWAY, INC.

FILED  
Apr 27, 2005  
Secretary of State

**Current Principal Place of Business:**

4655 WINDSTARR DRIVE  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

4655 WINDSTARR DRIVE  
DESTIN, FL 32541 US

**New Mailing Address:**

FEI Number: 41-2094705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOLAN, CECILE B MRS  
4655 WINDSTARR DRIVE  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: DOLAN, ROBERT J MR  
Address: 4655 WINDSTARR DRIVE  
City-St-Zip: DESTIN, FL 32541 US

Title: DVPT ( ) Delete  
Name: DOLAN, CECILE B MRS  
Address: 4655 WINDSTARR DRIVE  
City-St-Zip: DESTIN, FL 32541 US

Title: D ( ) Delete  
Name: DOLAN, RICHARD F MR  
Address: 11889 SNOWSHOE DRIVE  
City-St-Zip: PARKER, CO 80138 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DOLAN, RICHARD F MR  
Address: 11652 PAWLEY AVE  
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. DOLAN

PSD

04/27/2005

Electronic Signature of Signing Officer or Director

Date